

2025 Application Packet



Personal Data Form

NOTE:

The term "supervisor" appears several times in this document and may refer to one or more individuals, depending on the type of research assistance you received.

- Teacher Supervisor This is your high school science teacher, who may or may not have guided your scientific investigation but will accompany you to the Talent Search Honors Weekend. The teacher supervisor will also serve as the main contact person for communication between you and the Talent Search Director.
- Research Supervisor This may be your science teacher, but it can also be a university scientist in whose laboratory your investigation took place. It is not typical for university scientists to accompany students to Talent Search events.

Additionally, some demographic information requested on this form is collected on behalf of the American Association for the Advancement of Science (AAAS), which supports student research through the Youth Activities Committee.

Full name:				
Last	First		 Niddle	
Grade Level:				
Gender Identity with pronouns:				
Ethnicity:				
Home address:				
Street and number		City	Zip	
Names of Parents or Guardians:				



Personal Data Form (continued)

Name of school:		
School address:		
Street and number	City	Zip
Size of school (Enrollment):		
Urban Suburban Rural		
Your phone number (include area code):		
Your email address:		
Supervisor's full name:		
Supervisor's mailing address:		
Street and number	City	Zip
Supervisor's phone number (include area code):		
Supervisor's email address:		



Personal Data Form (continued)

Month and year of graduation:
College/University you plan to attend:
Anticipated major:
Title of your investigation:
Scientific field of investigation:
List the names, dates, and locations of other competitions where this research has been or will be presented:



Personal Data Form (continued)

Project	Displ	lay
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Will your poster need (check one):
□ Easel and board (poster-style)
□ Table (to support a tri-fold display)
Lunch (included)
Do you have any of the following? (check all that apply)
□ No restrictions
□ Vegetarian
□ Vegan
□ Gluten-free
Dairy-free
□ Nut allergy
□ Other food allergy (please specify): □ Other dietary preference/restriction (please specify):
AJAS Delegate Travel Information
• Arrival:
 Plan to arrive in Phoenix, Arizona by early afternoon on Wednesday, February 11, 2026. Conference registration will be held mid-day on Feb. 11.
• Departure:
 Plan to depart Phoenix starting the morning of Sunday, February 15, 2026.
 A late Saturday evening departure (after 6:15 pm, Feb. 14, 2026) is also possible. All delegates must plan for a minimum of 3 hotel nights in Phoenix.
Delegate Agreement
By applying to and participating in the Indiana Academy of Science Science Talent Search, I understand and agree that, if selected as a 1st place winner, I will serve as a delegate representing Indiana at the American Junior Academy of Science (AJAS) and the American Association for the Advancement of Science (AAAS) Annual Conference. Travel expenses will be covered by IAS.
Student Signature:
Parent/Guardian Signature (if under 18):



Data Sheet Narative

1. What have you learned from your Talent Search project? Be specific.				
2. How did you get the idea for your project? Was your project assigned to you?				



Data Sheet Narative (continued)

3. What did you do in your project that showed creativity? Please list examples.					
4. Dia you r	eceive assistance o	or auvice on you	ir research: 11 :	so, piease expiain	wno neipeu you
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Data Sheet Narative (continued)

COMMENTS BY RESEARCH SUPERVISOR

Please provide comments on items I through 4 above. If the research took place as part of a summer program at a university, be sure to describe the student's role in:

- · helping to develop the research problem, and
- designing or prescribing a method for its eventual solution.

(Attach a second sheet if necessary.)

under separate cover, rather than accompanying the student portion of the form.
Name of Supervisor
Signature of Supervisor
Title/Position

Parental/Guardian Consent Form

I grant permission for my child,	, to participate in
the Indiana Academy of Science (IAS) Science Talent Search program in its e	ntirety. Videos,
photographs and recordings are taken of students for use in Indiana Academ	ny of Science
publications. I give my permission to the Indiana Academy of Science to use	any photos in which
my son/daughter appears for the purpose of publicizing the IAS Science Tale	ent Search and other
IAS events. It is understood that this student will observe all program rules a	and will exhibit prope
behavior.	
Signature of Parent/Guardian	
Printed Name and Relationship to Child	
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Relationship to Child	